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CONFIRMATION NO. 1681

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/018,672		435	1645	GSKB-120US

APPLICANTS

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** CONTINUING DATA *****

This application is a 371 of PCT/EP00/05852 06/23/2000 *P.D.*

** FOREIGN APPLICATIONS *****

UNITED KINGDOM 9914945.2 06/25/1999 *P.D.*

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Verified and Acknowledged	/PADMA BASKAR/ Examiner's Signature	Initials	BELGIUM	3	23	3

ADDRESS

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TITLE

Basb111 polypeptide and polynucleotide from moraxella catarrhalis

FILING FEE RECEIVED 1434	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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